

**TRANSMITTAL
FORM**

Application Serial Number	10/622,631
Filing Date	JULY 21, 2003
First Named Inventor	MANUEL R. SILVA, JR., ET AL
Group Art Unit	3752
Examiner Name	GORMAN, D.W.
Attorney Docket No.	34098/E/1-US
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)
<input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings (Total Sheets _____)	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate)
<input checked="" type="checkbox"/> Petition for Extension of Time (1-month)	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application	<input type="checkbox"/> Status Inquiry <input type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8
<input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations	<input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program	<input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Amendment After Allowance	
<input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above		

CORRESPONDENCE ADDRESS

Direct all correspondence to:
TYCO ENGINEERED PRODUCTS & SERVICES
9 ROSZEL ROAD
PRINCETON, N.J. 08540
CUSTOMER NO: 60708

SIGNATURE BLOCK

Date: October 13, 2006
 Reg. No.: 38,708
 Tel. No.: (202) 416-6890
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David W. Laub
 Respectfully submitted
 David W. Laub
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FEE TRANSMITTAL
FY 2006

Complete if Known

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Confirmation No.	4556

METHOD OF PAYMENT

Payment Enclosed
 Check Money Order Other

The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-3840
 Required Fees (copy of this sheet enclosed).
 Additional fee required under 37 CFR 1.16 and 1.17.
 Overpayment Credit.

Applicant claims small entity status.

FEES CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	Filing	Search	Examination	Fee Paid
Utility	300	500	200	
Design	200	100	130	
Plant	200	300	160	
Reissue	300	500	600	
Provisional	200	0	0	

Small Entity Discount

1. TOTAL

2. EXCESS CLAIM FEES

	Fee	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Total Claims	Extra Claims	Fee Paid (\$)

- 20 or RP = x \$

RP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	x	Fee Paid (\$)
79	1	x \$,200.00	200.00

RP = highest number of total claims paid for, if greater than 3

Multiple Dependent Claims	Fee (\$)	Small Entity Fee (\$)	Fee Paid (\$)
	360	180	

2. TOTAL

\$206.00

3. APPLICATION SIZE FEE

If the specification and drawing exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional sheets or fraction thereof. See 35 U.S.C. 41(g)(1)(G) and 37 CFR 1.16(g).

Total Sheets	Extra Sheets	Additional \$5 or fraction thereof	Fee (\$)	Fee Paid
100	0	round up to a whole number	x	0.00

3. TOTAL

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(\$320.00)